



**NAVARRO COUNTY TREASURER'S OFFICE**

**Ryan Douglas**  
**County Treasurer**

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**Jane McCollum**  
**Chief Deputy Treasurer**

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May 24, 2022

To: H.M. Davenport Jr., County Judge  
Jason Grant, Commissioner Pct. 1  
Eddie Perry, Commissioner Pct. 2  
Eddie Moore, Commissioner Pct. 3  
James Olsen, Commissioner Pct. 4

Please review enclosed Navarro County's employee benefit renewal for plan year 2023. Deadline for returning all signed renewal documents to TAC HEBP is **June 29, 2022**. Please let me know the court's decision on which renewal package plan the County selected for plan year 2023 so that I can process and forward all required documents to TAC on or before deadline date.

Respectfully,

Jane McCollum, Chief Deputy Treasurer  
Navarro County

CC: Terri Gillen, County Auditor



May 23, 2022

Hon. H.M. Davenport, Jr.  
Navarro County Judge  
300 W. 3rd Ave. Suite 2  
Corsicana, TX 75110

Dear Judge Davenport:

The Texas Association of Counties Health and Employee Benefits Pool (TAC HEBP) is pleased to enclose Navarro County's employee benefit renewal for your upcoming plan anniversary date.

For over a decade, the Pool renewal has been below the state average for health plan rate increases. We continue to see an uptick in high-cost claimants (individuals whose claims exceed \$50,000). Claims related to the COVID-19 pandemic surged between late 2020 and early 2022 (so far, the Pool has paid nearly \$37 million in COVID-19-related claims). Still, the Pool renewal average of 5.9% is once again well below the projected 2022 medical and prescription drug trend (healthcare cost inflation) for Texas, which is 9.8–13.8%.

Renewal rates are set annually using a comprehensive actuarial process that determines the amount needed by the Pool to fund claims and operating costs for the coming year. We then evaluate each individual county or district based on a combination of the group's size, claims experience, age and gender statistics, and geographic area (healthcare claims vary significantly by geographic region of the state). Based on this analysis, your group's renewal rate may be above or below the Pool average. Your renewal rates for Plan Year 2023 are enclosed, along with your TAC Employee Benefits and Wellness Consultants' contact information. Your renewal information may include alternate benefit plans with pricing (if not, alternates are available upon request).

We are pleased to announce that TAC HEBP is offering a new service to our members: Cafeteria Plan (aka Section 125) Administration. The base service, free to Pool members, will provide you with compliance education and a plan document. Additional services are coming – please see the material included with your renewal packet for more information.

TAC HEBP understands how valuable healthcare benefits are for your employees and their families. We appreciate your partnership with the Pool and want to continue helping Navarro County offer this important benefit. Again, we thank you for your membership in the Pool and look forward to working with you during the upcoming plan year.

Sincerely,

A handwritten signature in black ink, appearing to read "Quincy Quinlan".

Quincy Quinlan, Director  
Health and Benefits Services Department  
Texas Association of Counties

cc: Terri Gillen

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**Navarro County's Renewal Rate change(s) for Plan Year 2023:**

**Health Plan:** 5.9%

**Dental Plan:** Employee or Employer-paid options available

**Life Plan(s):** No change to current Basic Life rates.

**Vision Plan:** Plan update: lower copays for PY 2023 with no change to Vision rates

**NOTE: Deadline for returning signed renewal documents to TAC HEBP: June 29, 2022**

Contact your TAC Employee Benefits Consultant right away if you:

- Want to discuss alternates (which may lower rates), and/or to learn about the impact of changes to your plan
- Want information about other TAC HEBP employee benefit plans (Dental, Life, or Vision)
- Are considering changes to your personnel policies that will affect benefits (such as adding/dropping retiree benefits, changing waiting period, etc.)

**Your Employee Benefits Consultant: Jonathan Collander (jonathanc@county.org) (800) 456-5974**

- **Healthy County forms:** Your renewal packet includes Healthy County Contacts and CSI (County Specific Incentive) documents. Please review and make changes as needed to your Wellness contact information. Please complete both forms and return them with your renewal. Contact your TAC Wellness Consultant if you have any questions.

**Your Wellness Consultant: Shameria Davis (shameriad@county.org) (800) 456-5974.**

- **Employee Open Enrollment:** You have the option to allow employees to make their open enrollment changes online through the Employee Self-Service portal by logging on to <https://mybenefits.county.org>.
- **Affordable Care Act Fees:** The HEBP Board voted to pay 2022 ACA fees on behalf of Pooled groups; see attached 'Health Care Reform Updates' document for details.
- **Open Enrollment Toolkit:** This will be sent via email by July 20 and contains the forms and notices your group will need to process employee benefit renewals.
- **When It's Due:** Once your renewal benefit decision has been approved, complete Navarro County's Renewal Notice and Benefits Confirmation (RNBC), print and initial/sign where indicated, and return to TAC HEBP via email, or fax to (512) 481-8481 on or before the date shown below.

**ACTION REQUIRED:** Please present the renewal, with Alternates if desired, to the Commissioners Court for a decision. Once the renewal plan has been selected, complete the RNBC form online, and **return the initialed and signed RNBC to TAC no later than June 29, 2022.**

**NOTE:** Submitting your RNBC after the due date will result in a delay in implementing your benefit plan renewal, including employee enrollment changes.

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## **Renewal Attachments:**

Renewal Letter

Renewal Documents

- Renewal Notice and Benefit Confirmation (RNBC)
- Alternate Health Plan Proposal (available by request for HRA, HSA or BEN plans)
- 12-month Claims Report
- High-Cost Claimant (HCC) Report
- Healthy County Wellness Contacts designation form
- Healthy County County-Specific Incentive (CSI) election form

Renewal Packet

## **Renewal Packet contents:**

Renewal Checklist

Renewal Calendar

*New:* Introduction to Cafeteria Plan Administration services

Improved for PY2023: Vision Plan Benefit Highlights

Health Care Reform update memo for 2022-23

Employee Self-Service for Open Enrollment instructions

Alternate Plan Selection and Online RNBC completion instructions

TAC HEBP Territory Map and Contacts

## RENEWAL RATE CHANGE(S) FOR PLAN YEAR 2023

### Deadline for renewal June 30, 2022

#### Medical Plan: Rate Increase 5.90%

|                           |          |                    |
|---------------------------|----------|--------------------|
| Breakdown: Employee Only: | \$ 55.40 | Increase per month |
| Employee Child:           | \$ 19.90 |                    |
| Employee (children):      | \$ 43.80 |                    |
| Employee Spouse:          | \$ 60.90 |                    |
| Employee Family:          | \$ 95.24 |                    |

#### Dental Plan: Rate Increase 0%

#### Vision Plan: Rate Increase 0%

#### Basic Life: Rate Increase 0%

#### Voluntary Life: Rate Increase 0%





## 2022 - 2023 Alternate Plan Proposal

Group: 66504 - Navarro County

Effective Date: 10/01/2022

|                           | Current Plan Year | Renewal Rates | Option 1    | Option 2    |
|---------------------------|-------------------|---------------|-------------|-------------|
| Plan:                     | 1100-NGS          | 1100-NGS      | 1200-NGS    | 1300-NGS    |
| Option:                   | RX-4A-NG          | RX-4A-NG      | RX-4A-NG    | RX-4A-NG    |
| <b>Rates</b>              |                   |               |             |             |
| Employee Only             | \$939.02          | \$994.42      | \$972.30    | \$934.68    |
| Employee + Child          | \$1,276.46        | \$1,351.76    | \$1,321.60  | \$1,270.26  |
| Employee + Child(ren)     | \$1,681.50        | \$1,780.70    | \$1,740.88  | \$1,673.08  |
| Employee + Spouse         | \$1,971.36        | \$2,087.66    | \$2,040.92  | \$1,961.34  |
| Employee + Family         | \$2,553.42        | \$2,704.06    | \$2,643.42  | \$2,540.22  |
| <b>Medical Plan</b>       |                   |               |             |             |
| Deductible In/Out Network | \$750/1000        | \$750/1000    | \$1000/3000 | \$1500/4500 |
| Co-Insurance % In/Out     | 80/60             | 80/60         | 80/60       | 80/60       |
| Co-Insurance Maximum      | \$3000/6000       | \$3000/6000   | \$3000/6000 | \$3500/7000 |
| Office Visit              | \$25              | \$25          | \$30        | \$30        |
| Specialist Visit          | \$35              | \$35          | \$40        | \$40        |
| Emergency Room Hospital   | \$120             | \$120         | \$150       | \$150       |
| <b>Prescription Plan</b>  |                   |               |             |             |
| Prescription Card Co-Pay  | 10/25/40          | 10/25/40      | 10/25/40    | 10/25/40    |
| Deductible                | \$0               | \$0           | \$0         | \$0         |

Proposal rates are based on the following information:

- Rates based upon current benefits and enrollment. A substantial change in enrollment (10% over 30 days or 30% over 90 days) may result in a change in rates.
- Rates are based on a minimum employer contribution of 100% of the employee only rate or current funding level.
- Retirees pay the same premium as active employees regardless of age for medical and dental.
- Form must be received by 06/30/2022 in order to avoid a delay in implementation of benefits and/or late processing fees.

Please indicate the selected plan here \_\_\_\_\_.

Fax the signed document to 1-512-481-8481.

Signature \_\_\_\_\_ Date \_\_\_\_\_



## 2022 - 2023 Renewal Notice and Benefit Confirmation

Group: 66504 - Navarro County

Anniversary Date: 10/01/2022

Return to TAC by: 06/30/2022

Please initial and complete each section confirming your group's benefits and fill out the contribution schedule according to your group's funding levels. Fax to 1-512-481-8481 or email to karenb@county.org.

For any plan or funding changes other than those listed below, please contact Karen Bowers at 1-800-456-5974.

### MEDICAL

Medical: Plan 1100-NGS \$25 Copay, \$750 Ded, 80%, \$3000 OOP Max, \$35 Sp Copay

RX Plan: Option 4A-NG \$10/25/40, \$0 Ded

Your % rate increase is: 5.90%

Your payroll deductions for medical benefits are:

Pre Tax

| Tier                  | Current Rates | New Rates Effective 10/1/2022 | New Amount Employer Pays | New Amount Employee Pays | New Amount Retiree Pays (if applicable) |
|-----------------------|---------------|-------------------------------|--------------------------|--------------------------|---|
| Employee Only         | \$939.02      | \$994.42                      | \$ 994.42                | \$ .00                   | \$ 994.42                               |
| Employee + Child      | \$1,276.46    | \$1,351.76                    | \$ 994.42                | \$ 357.34                | \$ 1,351.76                             |
| Employee + Child(ren) | \$1,681.50    | \$1,780.70                    | \$ 994.42                | \$ 786.28                | \$ 1,780.70                             |
| Employee + Spouse     | \$1,971.36    | \$2,087.66                    | \$ 994.42                | \$ 1,093.24              | \$ 2,087.66                             |
| Employee + Family     | \$2,553.42    | \$2,704.06                    | \$ 994.42                | \$ 1,709.64              | \$ 2,704.06                             |

\_\_\_\_\_ Initial to accept Medical Plan and New Rates.

### DENTAL

Dental: Plan I w/Ortho - 100% Prevent., \$50 Ded, 80% Bas., 50% Major

Your % rate increase is: 0.00%

Your payroll deductions for dental benefits are: Pre Tax

| Tier                  | Current Rates | New Rates Effective 10/1/2022 | New Amount Employer Pays | New Amount Employee Pays | New Amount Retiree Pays (if applicable) |
|-----------------------|---------------|-------------------------------|--------------------------|--------------------------|---|
| Employee Only         | \$32.32       | \$32.32                       | \$ 32.32                 | \$ 0.00                  | \$ 32.32                                |
| Employee + Child(ren) | \$89.68       | \$89.68                       | \$ 32.32                 | \$ 57.36                 | \$ 89.68                                |
| Employee + Spouse     | \$64.66       | \$64.66                       | \$ 32.32                 | \$ 32.34                 | \$ 64.66                                |
| Employee + Family     | \$122.02      | \$122.02                      | \$ 32.32                 | \$ 89.70                 | \$ 122.02                               |

\_\_\_\_\_ Initial to accept Dental Plan and New Rates.



**VISION**

Vision: **Plan I**

Your % rate increase is: **0.00%**

Your payroll deductions for vision benefits are: **Pre Tax**

| Tier                  | Current Rates | New Rates Effective 10/1/2022 | New Amount Employer Pays | New Amount Employee Pays | New Amount Retiree Pays (if applicable) |
|-----------------------|---------------|-------------------------------|--------------------------|--------------------------|---|
| Employee Only         | \$6.20        | \$6.20                        | \$ 6.20                  | \$ 0.00                  | \$ 6.20                                 |
| Employee + Child(ren) | \$12.44       | \$12.44                       | \$ 6.20                  | \$ 6.24                  | \$ 12.44                                |
| Employee + Spouse     | \$11.80       | \$11.80                       | \$ 6.20                  | \$ 5.60                  | \$ 11.80                                |
| Employee + Family     | \$18.28       | \$18.28                       | \$ 6.20                  | \$ 12.08                 | \$ 18.28                                |

\_\_\_\_\_ Initial to accept Vision Plan and New Rates.



**LIFE - BASIC**

**Basic Life Products:**

Coverage Volume per Employee: \$20,000

(Rates are per thousand)

|                 | <b>Current Rates</b> | <b>New Rates Effective 10/1/2022</b> | <b>Amount Employer Pays</b> | <b>Amount Employee/ Retiree Pays (if applicable)</b> |
|-----------------|----------------------|--------------------------------------|-----------------------------|--|
| Basic Term Life | \$0.146              | \$0.146                              | 100%                        | 0%   |
| Basic AD&D      | \$0.030              | \$0.030                              | 100%                        | 0%   |

\_\_\_\_\_ Initial to accept New Basic Life Rates.

**LIFE - VOLUNTARY**

**Voluntary Life Products:**

Coverage Volume per Retiree: \$20,000

(Rates are per thousand)

|                        | <b>Current Rates</b> | <b>New Rates Effective 10/1/2022</b> | <b>Amount Employer Pays</b> | <b>Amount Employee/ Retiree Pays (if applicable)</b> |
|------------------------|----------------------|--------------------------------------|-----------------------------|--|
| Voluntary Retiree Life | \$0.139              | \$0.139                              | 0%                          | 100%   |

(Rates are monthly charges)

Coverage Volume: SP \$10K/CH \$10K

|                          |         |         |    |      |
|--------------------------|---------|---------|----|------|
| Voluntary Dependent Life | \$3.800 | \$3.800 | 0% | 100% |
|--------------------------|---------|---------|----|------|

\* Please see attachment for detail listing of Voluntary Life product rates.

\_\_\_\_\_ Initial to accept New Voluntary Life Rates.

**RETIREE**

Please circle one for each benefit that applies.

Your group allows retiree coverage for:

|                        |  |   |
|------------------------|--|---|
| Medical                | <input checked="" type="checkbox"/> Pre 65 | <input checked="" type="checkbox"/> Post 65 |
| Dental                 | <input checked="" type="checkbox"/> Pre 65 | <input checked="" type="checkbox"/> Post 65 |
| Vision                 | <input checked="" type="checkbox"/> Pre 65 | <input checked="" type="checkbox"/> Post 65 |
| Voluntary Retiree Life | <input checked="" type="checkbox"/> Pre 65 | <input checked="" type="checkbox"/> Post 65 |

\_\_\_\_\_ Initial to confirm.

**WAITING PERIOD**

Waiting period applies to all benefits.

**Employees**  
30 days - 1st of the month following waiting period

**Elected Officials**  
30 days - 1st of the month following waiting period

\_\_\_\_\_ Initial to confirm.

**COBRA ADMINISTRATION**

Please indicate how your group manages COBRA administration:

- County/Group processes COBRA on OASYS  
*\*County/Group is responsible for fulfilling COBRA notification process and requirements.*
- BCBS COBRA Department processes COBRA  
*\*BCBS COBRA Department administers via COBRA contract with the County/Group*
- County/Group processes TAC HEBP Continuation of Coverage on OASys (< 20 employees)  
*\*County/Group is responsible for fulfilling notification process and requirements*

\_\_\_\_\_ Initial to confirm COBRA Administration.

**PLAN INFORMATION**

**Broker or Consultant Information**

Please confirm your broker or consultant's name, if applicable:

Agency Name \_\_\_\_\_  
 Agency Address \_\_\_\_\_  
 Number and Street \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_  
 Zip \_\_\_\_\_  
 Broker \_\_\_\_\_  
 Representative or \_\_\_\_\_  
 Consultant's Name \_\_\_\_\_  
 Contact Phone \_\_\_\_\_  
 Number \_\_\_\_\_  
 Contact Email \_\_\_\_\_  
 Address \_\_\_\_\_

\_\_\_\_\_ Initial to confirm Broker or Consultant information

- Please update broker or consultant's information.
- If applicable, broker commissions are included in rates listed on page 1.
- Retirees pay the same premium as active employees regardless of age for medical and dental.
- Rates based upon current benefits and enrollment. A substantial change in enrollment (10% over 30 days or 30% over 90 days) may result in a change in rates.

- Form must be received by **06/30/2022** in order to avoid additional administrative fees.
- Signature on the following page is required to confirm and accept your group's renewal.

# TAC HEBP Member Contact Designation Navarro County

## CONTRACTING AUTHORITY

As specified in the Interlocal Participation Agreement, each Member Group hereby designates and appoints, as indicated in the space provided below, a Contracting Authority of department head rank or above and agrees that TAC HEBP shall NOT be required to contact or provide notices to ANY OTHER person. Further, any notice to, or agreement by, a Member Group's Contracting Authority, with respect to service or claims hereunder, shall be binding on the Member. Each Member Group reserves the right to change its Contracting Authority from time to time by giving written notice to TAC HEBP.

Please list changes and/or corrections below.

Name/Title Terri Gillen /County Auditor

Address 300 West 3rd Ave., Ste 4  
Corsicana, TX 75110-4672

Phone 903-875-3306

Fax 903-654-3097

Email tgillen@navarrocounty.org

## BILLING CONTACT

Responsible for receiving all invoices relating to HEBP products and services.

Please list changes and/or corrections below.

Name/Title Jane McCollum/County Treasurer

Address 300 West 3rd Ave., Ste 3  
Corsicana, TX 75110-4672

Phone 903-654-3090

Fax 903-875-3391

Email jmccollum@navarrocounty.org

HIPAA Secured Fax

## COUNTY REPRESENTATIVE

HEBP's main contact for daily matters pertaining to the health benefits.

Please list changes and/or corrections below.

Name/Title Jane McCollum/County Treasurer

Address 300 West 3rd Ave., Ste 3  
Corsicana, TX 75110

Phone 903-654-3090

Fax 903-875-3391

Email jmccollum@navarrocounty.org

Date: \_\_\_\_\_

Signature of County Judge or Contracting Authority

H.M. Davenport Jr., County Judge

Please PRINT Name and Title

*The Texas Association of Counties would like to thank you for your membership in the only all county-owned and county directed Health and Employee Benefits Pool in Texas.*





# 12 Month Medical Report

Post Date : Mar 2022

Metrics : (Average Members, Average Subscribers, Total Contribution, Medical Paid, Pharmacy Paid, Paid)

Rows : (Paid Date)

Columns : (Metrics)

Paid Date : Last 12 Months

Coverage Type : (Medical)

Group : (066504 - NAVARRO COUNTY/TAC)

| Paid Date                        | Average Subscribers | Average Members | Total Contribution    | Medical Paid          | Pharmacy Paid       | Paid                  |
|----------------------------------|---------------------|-----------------|-----------------------|-----------------------|---------------------|-----------------------|
| Apr 2021                         | 282                 | 354             | \$268,420.16          | \$127,901.74          | \$70,234.05         | \$198,135.79          |
| May 2021                         | 277                 | 349             | \$264,092.86          | \$419,861.70          | \$60,469.49         | \$480,331.19          |
| Jun 2021                         | 276                 | 348             | \$263,227.40          | \$131,880.81          | \$61,780.71         | \$193,661.52          |
| Jul 2021                         | 274                 | 345             | \$261,496.48          | \$158,620.92          | \$63,910.45         | \$222,531.37          |
| Aug 2021                         | 282                 | 353             | \$268,420.16          | \$139,227.67          | \$70,732.28         | \$209,959.95          |
| Sep 2021                         | 276                 | 344             | \$262,232.08          | \$242,215.70          | \$78,810.78         | \$321,026.48          |
| Oct 2021                         | 274                 | 343             | \$283,675.06          | \$180,876.75          | \$58,733.74         | \$239,610.49          |
| Nov 2021                         | 277                 | 346             | \$286,492.12          | \$311,591.10          | \$54,854.45         | \$366,445.55          |
| Dec 2021                         | 279                 | 344             | \$286,952.80          | \$113,985.30          | \$73,568.99         | \$187,554.29          |
| Jan 2022                         | 281                 | 340             | \$286,117.00          | \$195,400.87          | \$81,244.70         | \$276,645.57          |
| Feb 2022                         | 277                 | 332             | \$282,220.02          | \$168,088.56          | \$65,543.76         | \$233,632.32          |
| Mar 2022                         | 274                 | 329             | \$279,740.40          | \$127,205.83          | \$70,232.00         | \$197,437.83          |
| <b>Total: Selected Filter(s)</b> | <b>277</b>          | <b>344</b>      | <b>\$3,293,086.54</b> | <b>\$2,316,856.95</b> | <b>\$810,115.40</b> | <b>\$3,126,972.35</b> |



**TEXAS ASSOCIATION of COUNTIES  
HEALTH AND EMPLOYEE BENEFITS POOL**

HCC - No PHI

Post Date: Mar 2022

Service Category: Total (Inpatient Facility, Outpatient Facility, Pharmacy, Professional)

Metrics: (Paid)

Claim Type: (MEDICAL, PHARMACY)

Coverage Type: (Medical)

Group: (066504 - NAVARRO COUNTY/TAC)

Paid Month: Last 12 Months

Paid: greater or equal 10000.00

Paid: (descending)

| Encrypted Member ID | Member Status    | Medical Paid | Pharmacy Paid | Paid         |
|---------------------|------------------|--------------|---------------|--------------|
| 3630726429          | 65+ Retiree      | \$12,856.59  | \$233,583.81  | \$246,440.40 |
| 3110168894          | Active           | \$241,230.24 | \$601.44      | \$241,831.68 |
| 17080240617         | Active           | \$187,514.19 | \$4,850.16    | \$192,364.35 |
| 3510180105          | Active           | \$151,139.05 | \$436.17      | \$151,575.22 |
| 20020581534         | Active           | \$101,990.56 | \$28,426.72   | \$130,417.28 |
| 3054575934          | Active           | \$106,506.23 | \$0.00        | \$106,506.23 |
| 3040645612          | Active           | \$78,213.72  | \$450.70      | \$78,664.42  |
| 3060547923          | Active           | \$267.42     | \$58,582.98   | \$58,850.40  |
| 3062629344          | Under 65 Retiree | \$50,952.35  | \$136.35      | \$51,088.70  |
| 18490239261         | Active           | \$50,104.71  | \$255.85      | \$50,360.56  |
| 15140190951         | Active           | \$39,827.15  | \$2,943.67    | \$42,770.82  |
| 4720206868          | Active           | \$40,626.71  | \$940.40      | \$41,567.11  |
| 9060115934          | 65+ Retiree      | \$7,113.38   | \$31,801.08   | \$38,914.46  |
| 8140082553          | Active           | \$35,875.44  | \$1,602.25    | \$37,477.69  |
| 3170039671          | Active           | \$1,957.42   | \$32,152.76   | \$34,110.18  |
| 3065591813          | Active           | \$24,478.48  | \$6,051.65    | \$30,530.13  |
| 20051552642         | Active           | \$4,051.17   | \$23,594.81   | \$27,645.98  |
| 18990194646         | Active           | \$26,474.37  | \$662.39      | \$27,136.76  |
| 3054296659          | Active           | \$13,783.77  | \$12,289.30   | \$26,073.07  |
| 19720136785         | Active           | \$25,199.38  | \$668.84      | \$25,868.22  |
| 5680195993          | Active           | \$961.20     | \$24,305.14   | \$25,266.34  |
| 18871088739         | Active           | \$24,788.54  | \$0.00        | \$24,788.54  |
| 3062629349          | Under 65 Retiree | \$1,083.59   | \$23,631.54   | \$24,715.13  |



**TEXAS ASSOCIATION of COUNTIES**  
**HEALTH AND EMPLOYEE BENEFITS POOL**

| Encrypted Member ID | Member Status | Medical Paid | Pharmacy Paid | Paid        |
|---------------------|---------------|--------------|---------------|-------------|
| 3630003201          | Active        | \$23,591.46  | \$0.00        | \$23,591.46 |
| 18340219032         | Active        | \$21,042.52  | \$1,698.08    | \$22,740.60 |
| 8840146739          | Active        | \$22,434.87  | \$89.79       | \$22,524.66 |
| 13720193726         | Active        | \$21,821.29  | \$0.00        | \$21,821.29 |
| 3054575856          | Active        | \$17,503.46  | \$4,179.73    | \$21,683.19 |
| 16710182199         | Active        | \$21,178.59  | \$137.25      | \$21,315.84 |
| 3043311046          | Active        | \$21,286.90  | \$1.76        | \$21,288.66 |
| 18240226423         | Active        | \$21,229.84  | \$0.00        | \$21,229.84 |
| 3040645704          | Active        | \$17,255.53  | \$3,435.71    | \$20,691.24 |
| 3044450769          | Active        | \$4,005.49   | \$16,135.85   | \$20,141.34 |
| 3630726423          | Active        | \$20,138.63  | \$0.00        | \$20,138.63 |
| 18640403966         | Active        | \$4,679.99   | \$15,299.55   | \$19,979.54 |
| 18700127811         | Active        | \$18,914.30  | \$109.63      | \$19,023.93 |
| 5240002606          | Active        | \$3,239.61   | \$15,722.43   | \$18,962.04 |
| 3067592398          | Active        | \$17,595.50  | \$1,208.02    | \$18,803.52 |
| 3060184914          | Active        | \$13,962.57  | \$4,825.11    | \$18,787.68 |
| 19640133851         | Active        | \$18,451.86  | \$129.36      | \$18,581.22 |
| 17461512161         | Active        | \$0.00       | \$17,728.03   | \$17,728.03 |
| 8380210167          | Active        | \$17,029.61  | \$94.16       | \$17,123.77 |
| 17380132764         | Active        | \$3,790.22   | \$12,444.29   | \$16,234.51 |
| 19980461493         | Active        | \$16,093.66  | \$0.00        | \$16,093.66 |
| 19800597010         | Active        | \$15,920.59  | \$157.11      | \$16,077.70 |
| 19960425404         | Active        | \$15,984.60  | \$48.09       | \$16,032.69 |
| 6120220877          | Active        | \$7,012.75   | \$8,971.74    | \$15,984.49 |
| 16000105117         | Active        | \$14,333.97  | \$74.34       | \$14,408.31 |
| 17944813244         | Active        | \$12,826.59  | \$1,341.20    | \$14,167.79 |
| 17030167365         | Active        | \$5,200.37   | \$8,960.18    | \$14,160.55 |
| 18410476694         | Active        | \$13,642.12  | \$391.78      | \$14,033.90 |
| 17770096903         | Active        | \$12,637.71  | \$766.95      | \$13,404.66 |
| 18270153502         | Active        | \$13,381.82  | \$0.00        | \$13,381.82 |
| 3044464030          | Active        | \$1,928.30   | \$11,407.77   | \$13,336.07 |
| 3062629424          | Active        | \$9,865.96   | \$3,011.86    | \$12,877.82 |
| 19920484279         | Active        | \$12,100.16  | \$0.00        | \$12,100.16 |
| 18140110717         | Active        | \$11,917.22  | \$150.06      | \$12,067.28 |
| 16370570564         | Active        | \$2,122.35   | \$9,807.24    | \$11,929.59 |
| 12020159357         | Active        | \$1,926.87   | \$9,883.66    | \$11,810.53 |
| 18990502234         | Active        | \$623.17     | \$10,969.94   | \$11,593.11 |
| 3062629404          | Active        | \$11,043.11  | \$438.83      | \$11,481.94 |
| 17510640163         | Active        | \$2,057.46   | \$8,787.00    | \$10,844.46 |



TEXAS ASSOCIATION *of* COUNTIES  
HEALTH AND EMPLOYEE BENEFITS POOL

| Encrypted Member ID     | Member Status | Medical Paid          | Pharmacy Paid       | Paid                  |
|-------------------------|---------------|-----------------------|---------------------|-----------------------|
| 17770096833             | Active        | \$10,478.69           | \$226.11            | \$10,704.80           |
| 3043383997              | Active        | \$9,505.23            | \$1,050.25          | \$10,555.48           |
| 12920427354             | Active        | \$10,288.30           | \$0.00              | \$10,288.30           |
| 18100155099             | Active        | \$3,679.89            | \$6,498.71          | \$10,178.60           |
| 16990183989             | Active        | \$9,893.16            | \$273.66            | \$10,166.82           |
| 18240757696             | Active        | \$10,037.41           | \$126.66            | \$10,164.07           |
| <b>Query Totals: 68</b> |               | <b>\$1,770,649.36</b> | <b>\$664,549.90</b> | <b>\$2,435,199.26</b> |





# 12 Month Dental Report

Post Date : Mar 2022

Metrics : (Average Subscribers, Average Members, Total Contribution, Dental Paid)

Rows : (Paid Date)

Columns : (Metrics)

Paid Date : Last 12 Months

Coverage Type : (Dental)

Group : (066504 - NAVARRO COUNTY/TAC)

| Paid Date                        | Average Subscribers | Average Members | Total Contribution  | Dental Paid         |
|----------------------------------|---------------------|-----------------|---------------------|---------------------|
| Apr 2021                         | 281                 | 399             | \$12,560.90         | \$16,299.57         |
| May 2021                         | 276                 | 392             | \$12,313.52         | \$6,079.83          |
| Jun 2021                         | 276                 | 392             | \$12,313.52         | \$15,359.44         |
| Jul 2021                         | 274                 | 392             | \$12,338.16         | \$7,993.51          |
| Aug 2021                         | 282                 | 403             | \$12,712.82         | \$7,696.54          |
| Sep 2021                         | 276                 | 393             | \$12,377.16         | \$10,343.76         |
| Oct 2021                         | 274                 | 411             | \$13,014.22         | \$8,044.30          |
| Nov 2021                         | 277                 | 417             | \$13,233.22         | \$8,806.14          |
| Dec 2021                         | 279                 | 415             | \$13,093.44         | \$9,492.48          |
| Jan 2022                         | 281                 | 412             | \$13,036.06         | \$5,785.96          |
| Feb 2022                         | 277                 | 409             | \$12,971.44         | \$5,950.70          |
| Mar 2022                         | 274                 | 406             | \$12,874.48         | \$14,639.11         |
| <b>Total: Selected Filter(s)</b> | <b>277</b>          | <b>403</b>      | <b>\$152,838.94</b> | <b>\$116,491.34</b> |



TEXAS ASSOCIATION of COUNTIES  
HEALTH AND EMPLOYEE BENEFITS POOL

## HEALTHY COUNTY WELLNESS CONTACT DESIGNATION

Navarro County

### WELLNESS COORDINATOR

The Wellness Coordinator is the primary contact regarding the Healthy County wellness program. The wellness coordinator is responsible for administrating Healthy County components and informing employees of all wellness resources available.

**Current Wellness Coordinator**

**Name:** Lorie Stovall

**Title:** CEA-FCS Healthy Coordinator

**Address:** 313 W 3rd Ave  
Corsicana, TX 75110

**Email:** lorie.stovall@ag.tamu.edu

**Phone Number:** (903) 654-2407

**Fax Number:**

**Please list changes and/or corrections:**

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### WELLNESS SPONSOR

The Wellness Sponsor is responsible for supporting the coordinator in administrating Healthy County components and encouraging county employees to access all Healthy County wellness resources available. An elected official in this role is preferred to illustrate management support for wellness.

**Current Wellness Sponsor**

**Name:** Ms. Julie Wright

**Title:**

**Address:** 300 W 3rd Ave Ste 17  
Corsicana, TX 75110-4672

**Email:** jwright@navarrocounty.org

**Phone Number:** (903) 654-3090

**Fax Number:**

**Please list changes and/or corrections:**

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Phone: 903-654-3039

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Fax: 903-874-6053

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Contracting Authority Signature: \_\_\_\_\_

Date: \_\_\_\_\_



TEXAS ASSOCIATION of COUNTIES  
HEALTH AND EMPLOYEE BENEFITS POOL

## HEALTHY COUNTY: COUNTY SPECIFIC INCENTIVE PROGRAM

### Navarro County

A County Specific Incentive (CSI) is a wellness program that rewards employees and/or spouses for healthy behaviors such as completing an annual exam, tobacco affidavit, or participating in a physical activity program in exchange for avoiding a premium contribution, a lower monthly premium, earn additional days of PTO, or other rewards decided on by the County or District. Penalties and Rewards are administered at the county or district level.

Healthy County is available to assist in the process of designing, communicating, and tracking a CSI. Employees will be able to view their progress and completion of the incentive on the Healthy County energized by Sonic Boom portal.

### YOUR COUNTY OR DISTRICT'S CSI

Our records indicate that Navarro County currently has a County Specific Incentive program in place. Please make a selection below to let us know if you would like to keep your current design in place for the 2022-2023 plan year, or if you would like to make modifications to your current design. If you select "Yes," your county or district's Wellness Consultant will reach out to you to confirm reward and penalty options for the upcoming plan year. Please also feel free to contact your consultant at any time to begin this process. If you decide to make changes to your CSI, there is a six week waiting period before employees can view the program online.

Yes, we would like to continue with the same CSI program for the 2022-2023 plan year.

**Current CSI >**

Annual Physical: Wellness Rate and Avoid the \$25 Monthly Health Benefits Contribution

We are interested in making changes to our CSI program.

County or District Name: Navarro County

Printed Name and Title: H.M. Davenport Jr., County Judge

Contracting Authority Signature: \_\_\_\_\_

Date: \_\_\_\_\_